



15-CT-4697  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Senzig et al.

Serial No.: 09/451,965

Filed: November 30, 1999

For: IMAGING SYSTEM FOR  
GENERATING HIGH QUALITY  
IMAGES

:  
: Art Unit: 2882  
:  
: Examiner: Ho, Allen C.  
:  
:

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER OF PATENTS AND TRADEMARKS**

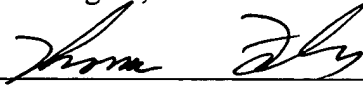
Express Mail mailing label number: EL 817714294 US

Date of Mailing: July 1, 2002

I certify that the documents listed below:

- Amendment Transmittal form (3 pgs.), in duplicate
- Amendment After Final in response to Office Action dated April 1, 2002 (18 pgs.)
- Submission of Marked Up Claims (3 pgs.)
- Return post card

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Box AF, Commissioner for Patents, Washington, D.C. 20231-0001.

  
\_\_\_\_\_  
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Art Unit: 2882

Examiner: Ho, Allen C.

Box AF  
Commissioner for Patents  
Washington, D.C. 20231

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TRANSMITTAL

1. Transmitted herewith is:

**Amendment After Final in response to Office Action dated April 1, 2002  
(18 pgs.); Submission of Marked Up Claims (3 pgs.); Certificate of Express Mail  
(1 pg.) ; Return Post Card**

STATUS

2. Applicant

Claims small entity status.  
☒ is other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

☒ deposited with the United States Postal Service with sufficient postage as "Express Mail Post Office to Addressee" in an envelope addressed to: Box AF, Commissioner for Patents, Washington, D.C. 20231, Express Mail No. EL 817714294 US.

Date: July 1, 2002

FACSIMILE

Transmitted by facsimile to the Patent and Trademark Office

Thomas M. Fisher  
Reg. No. 47,564

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 55.00
_____ Second month	\$ 400.00	\$ 200.00
_____ Third month	\$ 920.00	\$ 460.00
_____ Fourth month	\$1,440.00	\$ 720.00
_____ fifth month	\$1,960.00	\$ 980.00

Fee: \$ 0.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

\_\_\_\_\_ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ 0.00

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

## FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.	MINUS		=	x \$42 = \$		x \$84 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$130 = \$		+ \$280 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

- (a) ☒ No additional fee for claims is required.

**OR**

- (b) \_\_\_\_\_ Total additional fee for claims required \$

## FEE PAYMENT

5. \_\_\_\_\_ Attached is a check in the sum of \$ \_\_\_\_\_  
 \_\_\_\_\_ Charge Deposit Account No. 01-2384 the sum of \$  
 \_\_\_\_\_ A duplicate of this transmittal is attached.

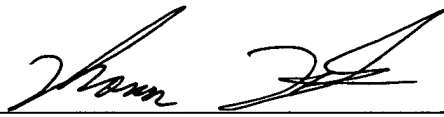
## FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. \_\_\_\_\_ Other:

  
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